PLEASE READ	ALL INSTRUCTION	IS BEFORE (COMPLETING THIS FORM.	
APPLICATION	FLORIDA DEPARTM	ENT OF STATE		
FOR Jim Smith REINSTATEMER 2 Solution of State		FILED		
DOCUMENT # P0100027300			02 NOV 20 AM 9: 54	
SJW PROCESSING, INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA	·
Principal Place of Business Mailing Address			-	
4277 MAHOGANY RIDGE DRIVE WESTON FL 33331	4277 MAHOGANY RIDGE DRIVE WESTON FL 33331			
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable			400009107744 11/20/0201031021 **150.00	
4209 Lauren Eidge Cir: 4204-Lauren E Suite, Apt. #, etc. Suite, Apt. #, etc.		If Applicable	4. Date Incorporated or Qualified To Do Business in Florida 03/16/2001	
ity & State City & State			5. FEI Number Applied Fo	
Zip 33331 Country	Zip Cour	ntry	- 6. 59.75 Additional F	
7. Names and Street Addresses of Each Officer and/		vations must list at lease	for a Certificate of Stat	us
Title(s) Street		itreet Address of Each	h	
D WURTENBERGER, MICHAEL 4277 MAHOGA		NY RIDGE DRIVE-		
	4204 La	wen Ridg	3e Cir. Weston, FZ 33331	· _
		<u> </u>		
		· · · · · · · · ·		
· ·				
Name			9. Name and Address of New Registered Agent	
WURTENBERGER, MICHAEL 4277 MAHOGANY RIDGE DRIVE		Street Address (P.C	O. Box Number is Not Acceptable)	CR2E040 (8/02)
WESTON FL 33331		Suite, Apt. #, Etc.		
City			State Zip Code	_
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the oblig				-
MILL.	· /			
Signature of Registered Agent			Date 11/5/02	_
11. I certify that I am an officer or director or the receiver this reinstatement application, the reason for dissolut owed by the corporation have been paid and the nan on this application is true and accurate, and my signal	nes of individuals listed on this term	ate name sausiles the	ovided for in chapter 607 or 617, F.S. I further certify that when filing he requirements of section 607.0401 or 617.0401, F.S., that all fees n exemption under section 119.07(3)(i), F.S. The information indicated path	
SIGNATURE: MUCHAL	REQUIR		MITA	
BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Davtime Phone #	1

HAFT, STEINLAUF & CO.

ACCOUNTANTS AND TAX CONSULTANTS CORNERSTONE ONE - SUITE #475 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324-4470

GLENN R. HAFT, CPA DANIEL P. STEINLAUF, EA

BROWARD: (954) 476-7020 DADE (305) 949-1169 FACSIMILE: (954) 452-0790

November 5, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: SJW Processing, Inc. FEIN 65-1084662 Document # PO1000027300

Dear Sir or Madam:

We have been requested by the above named corporation to contact you on this matter. Enclosed please find the Application For Reinstatement to return this corporation to an "active" status. Also enclosed is a check for \$150 to cover the fee to file the report without penalty.

SJW Processing, Inc. changed its address and somehow mail did not get forwarded to the new address in a timely manner. When they did receive correspondence from -the-Division of Corporations it was the Notice of Dissolution. Therefore, the corporation did not get any prior uniform business report notices. For this reason we respectfully request that you waive the penalty, accept the \$150 check as the filing fee and reinstate SJW Processing, Inc. to "active" status.

As we do not have a valid power of attorney on file with your office and in order to expedite this matter, the Director has also signed this letter to affirm its contents.

Sincerely,

Haft, Steinlauf & Co. 2 auf enclosures. cc: SJW Processing, Inc. THE MARKET IN A REAL PROPERTY AND A MARKET 14**6**277 B.C. Same a ang panan المراجع المراجع المراجع The above letter has been prepared with my expressed authorization and consent. + ·

Michael Wurtenberger